

SUNRISE CREDIT SERVICES  
260 Airport Plaza  
P.O. Box 9100  
Farmingdale, NY 11735-9100

Academy Collection Service, Inc.  
10965 Decatur Road  
Philadelphia, PA 19154-3210

Aegis Receivables Management, Inc.  
P.O. Box 165809  
Irving, TX 75016-5809

Alliance One Receivables Management  
4850 Street Road  
Suite 300  
Trevose, PA 19053

AMERICAN EXPRESS  
P.O. Box 1270  
Newark, NJ 07101-1270

BANK OF AMERICA  
P.O. Box 15019  
Wilmington, DE 19886-5019

Bass-Fineberg Leasing, Inc.  
P.O. Box 46938  
Bedford, OH 44146

Bass-Fineberg Leasing, Inc.  
P.O. Box 46938  
Bedford, OH 44146

BK-16/ Credit Operations  
P.O. Box 81410  
Cleveland, OH 44181-0410

Capital Management Services, LP  
726 Exchange Street  
Suite 700  
Buffalo, NY 14210

CAPITAL ONE BANK (USA) N.A.  
P.O. Box 71083  
Charlotte, NC 28272-1083

CAPITAL ONE BANK (USA), N.A.  
P.O. Box 71083  
Charlotte, NC 28272-1083

CHASE  
P.O. Box 15153  
Wilmington, DE 19886-5153

Chase Home Finance  
P.O. Box 78420  
Phoenix, AZ 85062-8420

Citibank (South Dakota), N.A.  
P.O. Box 6074  
Sioux Falls, SD 57117-6074

CLEVELAND CLINIC  
P.O. Box 94909  
Cleveland, OH 44195

CREDIT FIRST N.A.  
P.O. Box 81344  
Cleveland, OH 44188-0344

DINERS CLUB  
P.O. Box 6003  
The Lakes, NV 88901-6003

DIPAOLA QUALITY CLIMATE  
144 Chess Street  
New Eagle, PA 15067

DISCOVER CARD  
P.O. Box 71084  
Charlotte, NC 28272-1084

Duquesne University  
P.O. Box 640094  
Pittsburgh, PA 15264-0094

EMERGENCY PROFESSIONAL SERVICES  
7123 Pearl Road  
Cleveland, OH 44130-4975

FIA CARD SERVICES  
P.O. Box 15026  
Wilmington, DE 19850-5026

Frederick J. Hanna & Associates, PC  
1427 Roswell Road  
Marietta, GA 30062

HOME DEPOT CREDIT SERVICES  
Processing Center  
DesMoines, IA 50364-0500

HONDA FINANCIAL SERVICES  
National Service Center  
P.O. Box 165378  
Irving, TX 75016-5378

JP RECOVERY  
P.O. Box 16749  
Rocky River, OH 44116

JUNIPER VISA/BARCLAYCARD  
P.O. Box 13337  
Philadelphia, PA 19101-3337

Key Education  
c/o Great Lakes Educational  
Loan Services, Inc.  
2401 International Lane  
Madison, WI 53704-3192

KEYBANK MASTERCARD  
P.O. Box 183051  
Columbus, OH 43218-3051

KeyBank National Association  
c/o Great Lakes Educational  
Loan Services, Inc.  
2401 International Lane  
Madison, WI 53704-3192

MAGEE WOMENS HOSPITAL OF UPMC  
P.O. Box 382059  
Pittsburgh, PA 15250-8059

MAGEE-WOMENS HOSPITAL OF UPMC  
P.O. Box 382059  
Pittsburgh, PA 15250-8059

Messerli and Kramer P.A.  
Attorneys at Law  
3033 Campus Drive  
Suite 250  
Plymouth, MN 55441-2662

NATIONAL CITY  
P.O. Box 856177  
Louisville, KY 40285-6177

NCO  
2665 Elizabeth Lake Road  
Waterford, MI 48328-3277

NCO Financial Systems, Inc.  
507 Prudential Road  
Horsham, PA 19044

NCO-Medclear  
P.O. Box 8547  
Philadelphia, PA 19101

PNC Mortgage  
P.O. Box 533510  
Atlanta, GA 30353

Robin Marks  
133 Doubletree Drive  
Venetia, PA 15367

Robin Marks  
133 Doubletree Dr  
Venetia, PA 15367

Robin Marks  
133 Doubletree Dr  
Venetia, PA 15367

Robin Marks  
133 Doubletree Dr.  
Venetia, PA 15367

Rodney and Rosa Suggs  
6665 Ayleshire Drive  
Solon, OH 44139

Sallie Mae  
P.O. Box 9500  
Wilkes Barre, PA 18773-9500

Sallie Mae  
SLMA Servicing Center  
P.O. Box 9500  
Wilkes-Barre, PA 18773-9500

SEARS CREDIT CARDS  
P.O. Box 183082  
Columbus, OH 43218-3082

ST. CLAIR HOSPITAL  
1000 Bower Hill Road  
Pittsburgh, PA 15243-1873

ST. VINCENT CHARITY HOSPITAL  
2351 East 22nd Street  
Cleveland, OH 44115

THE REVENUE GROUP  
3700 Park East Drive  
Beachwood, OH 44122

Third Federal Savings & Loan  
7007 Broadway Avenue  
Cleveland, Ohio 44105

U.S. Department of Education  
Direct Loan Servicing Center  
P.O. Box 5609  
Greenville, TX 75403-5609

United Recovery Systems, LP  
P.O. Box 722929  
Houston, TX 77272-2929  
Attn: Marcus Brown

United Recovery Systems, LP  
P.O. Box 722929  
Houston, TX 77272-2929  
Attn: Christian Santos

UNIVERSITY SUBURBAN HOSPITAL  
1611 South Green Road  
South Euclid, OH 44121

US BANK  
P.O. Box 790408  
St. Louis, MO 63179-0408

USD Ed.  
P.O. Box 530260  
Atlanta, GA 30353-0260

WELLS FARGO FINANCIAL CARDS  
P.O. Box 98791  
Las Vegas, NV 89193-8791

Weltman, Weinberg & Reis Co., L.P.A  
525 Vine Street  
Suite 800  
Cincinnati, OH 45202-3122

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF PENNSYLVANIA

In re: Bruce R. Marks Robin B. Marks  
Debtors

Case No. \_\_\_\_\_  
Chapter 7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of 7 sheet(s) is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: 3/2/2010

Signed: /s/ Bruce R. Marks  
Bruce R. Marks

Dated: 3/2/2010

Signed: /s/ Robin B. Marks  
Robin B. Marks

Signed: /s/Carol L. Hanna  
Carol L. Hanna, Esquire  
Attorney for Debtor(s)  
Bar no.: 59914  
Carol L. Hanna, Attorney at Law  
2700 South Park Road  
Bethel Park, PA 15102  
Telephone No.: (412) 831-5600  
Fax No.: (412) 831-5638  
E-mail address:



<b>United States Bankruptcy Court Western District of Pennsylvania</b>						<b>Voluntary Petition</b>			
Name of Debtor (if individual, enter Last, First, Middle): <b>Marks, Bruce, R.</b>					Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Marks, Robin, B.</b>				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN(if more than one, state all): <b>XXX-XX-0105</b>					Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN(if more than one, state all): <b>XXX-XX-7490</b>				
Street Address of Debtor (No. & Street, City, and State): <b>133 Doubletree Drive Venetia, PA</b>					Street Address of Joint Debtor (No. & Street, City, and State): <b>133 Doubletree Drive Venetia, PA</b>				
ZIP CODE <b>15367</b>					ZIP CODE <b>15367</b>				
County of Residence or of the Principal Place of Business: <b>WASHINGTON</b>					County of Residence or of the Principal Place of Business: <b>WASHINGTON</b>				
Mailing Address of Debtor (if different from street address):					Mailing Address of Joint Debtor (if different from street address):				
ZIP CODE					ZIP CODE				
Location of Principal Assets of Business Debtor (if different from street address above):									
ZIP CODE									
<b>Type of Debtor</b> (Form of Organization) (Check one box.)  <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)  			<b>Nature of Business</b> (Check one box)  <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other  <hr/> <b>Tax-Exempt Entity</b> (Check box, if applicable)  <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code.)			<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)  <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13  <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  <b>Nature of Debts</b> (Check one box)  <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.			
<b>Filing Fee</b> (Check one box)  <input checked="" type="checkbox"/> Full Filing Fee attached  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b) See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					<b>Chapter 11 Debtors</b>  <b>Check one box:</b>  <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b>  <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. ----- <b>Check all applicable boxes</b>  <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).				
<b>Statistical/Administrative Information</b>  <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.									<b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Estimated Number of Creditors</b> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1- 50- 100- 200- 1,000- 5,001- 10,001- 25,001- 50,001- Over 49 99 199 999 5,000 10,000 25,000 50,000 100,000 100,000									
<b>Estimated Assets</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> \$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million \$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001 to \$100 million \$100,000,001 to \$500 million \$500,000,001 to \$1 billion More than \$1 billion									
<b>Estimated Liabilities</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> \$0 to \$50,000 \$50,001 to \$100,000 \$100,001 to \$500,000 \$500,001 to \$1 million \$1,000,001 to \$10 million \$10,000,001 to \$50 million \$50,000,001 to \$100 million \$100,000,001 to \$500 million \$500,000,001 to \$1 billion More than \$1 billion									

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Bruce R. Marks, Robin B. Marks</b>							
<b>All Prior Bankruptcy Cases Filed Within Last 8 Years</b> (If more than two, attach additional sheet.)									
Location Where Filed: <b>NONE</b>	Case Number:	Date Filed:							
Location Where Filed:	Case Number:	Date Filed:							
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)									
Name of Debtor: <b>NONE</b>	Case Number:	Date Filed:							
District:	Relationship:	Judge:							
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).  <table style="width: 100%; border: none;"> <tr> <td style="width: 70%; text-align: center;"> <b>X /s/CAROL L. HANNA</b> </td> <td style="width: 30%; text-align: center;"> <b>3/2/2010</b> </td> </tr> <tr> <td style="text-align: center;">Signature of Attorney for Debtor(s)</td> <td style="text-align: center;">Date</td> </tr> <tr> <td style="text-align: center;"><b>CAROL L. HANNA, Esquire</b></td> <td style="text-align: center;"><b>59914</b></td> </tr> </table>		<b>X /s/CAROL L. HANNA</b>	<b>3/2/2010</b>	Signature of Attorney for Debtor(s)	Date	<b>CAROL L. HANNA, Esquire</b>	<b>59914</b>
<b>X /s/CAROL L. HANNA</b>	<b>3/2/2010</b>								
Signature of Attorney for Debtor(s)	Date								
<b>CAROL L. HANNA, Esquire</b>	<b>59914</b>								
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No									
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.									
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box)									
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.									
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.									
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.									
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)									
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following).									
_____ (Name of landlord that obtained judgment)									
_____ (Address of landlord)									
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and									
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.									
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).									

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>Bruce R. Marks, Robin B. Marks</b>
<b>Signatures</b>	
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X /s/ Bruce R. Marks</b>          _____          Signature of Debtor <b>Bruce R. Marks</b></p> <p><b>X /s/ Robin B. Marks</b>          _____          Signature of Joint Debtor <b>Robin B. Marks</b></p> <p>_____          Telephone Number (If not represented by attorney)  <b>3/2/2010</b>          _____          Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only <b>one</b> box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p><b>X Not Applicable</b>          _____          (Signature of Foreign Representative)</p> <p>_____          (Printed Name of Foreign Representative)</p> <p>_____          Date</p>
<p style="text-align: center;"><b>Signature of Attorney</b></p> <p><b>X /s/Carol L. Hanna</b>          _____          Signature of Attorney for Debtor(s)</p> <p><b>Carol L. Hanna, Esquire Bar No. 59914</b>          _____          Printed Name of Attorney for Debtor(s) / Bar No.</p> <p><b>Carol L. Hanna, Attorney at Law</b>          _____          Firm Name</p> <p><b>2700 South Park Road Bethel Park, PA 15102</b>          _____          Address</p> <p>_____          Address</p> <p><b>(412) 831-5600</b> <b>(412) 831-5638</b>          _____          Telephone Number</p> <p><b>3/2/2010</b>          _____          Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;"><b>Signature of Non-Attorney Petition Preparer</b></p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p><b>Not Applicable</b>          _____          Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____          Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>_____          Address</p> <p>_____          Address</p> <p><b>X Not Applicable</b>          _____          _____          Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X Not Applicable</b>          _____          Signature of Authorized Individual</p> <p>_____          Printed Name of Authorized Individual</p> <p>_____          Title of Authorized Individual</p> <p>_____          Date</p>	

In re: Bruce R. Marks   Robin B. Marks,  
Debtors

Case No. \_\_\_\_\_  
(if known)

SCHEDULE A - REAL PROPERTY

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
133 Doubletree Drive Venetia, PA 15367 (Residence-Debtors wishes to reaffirm)	Co-Owner	J	\$ 402,172.00	\$ 371,868.54
6665 Ayleshire Drive Solon, OH 44139 (Debtors wish to surrender property)	Co-Owner	J	\$ 389,900.00	\$ 409,707.78
Total ➤			\$ 792,072.00	

(Report also on Summary of Schedules.)

In re Bruce R. Marks Robin B. Marks

Case No. \_\_\_\_\_

Debtors

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand		Cash	J	200.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Citizens Bank Account Savings #0209.	J	1,000.17
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Citizens Bank Checking Account #XXXX9824.	J	7,508.19
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		National City (now PNC) Checking Account #XXXX7004	J	179.18
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		National City (now PNC) Savings Account #XXXX6703; Joint with Husband and Son, Bradley;	J	100.54
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		National City (now PNC) Savings Account #XXXX7179	J	50.44
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Third Federal Savings Bank Checking Account #XXXX5100	J	101.46
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		(5) Televisions	J	200.00
Household goods and furnishings, including audio, video, and computer equipment.		Basement furniture	J	100.00
Household goods and furnishings, including audio, video, and computer equipment.		Bedroom suite for sons	J	200.00
Household goods and furnishings, including audio, video, and computer equipment.		Dining Room Furniture	J	350.00

In re Bruce R. Marks Robin B. Marks

Case No. \_\_\_\_\_

Debtors

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>Family room furniture</b>	<b>J</b>	<b>450.00</b>
Household goods and furnishings, including audio, video, and computer equipment.		<b>Kitchen furniture</b>	<b>J</b>	<b>100.00</b>
Household goods and furnishings, including audio, video, and computer equipment.		<b>Living room furniture</b>	<b>J</b>	<b>100.00</b>
Household goods and furnishings, including audio, video, and computer equipment.		<b>Master bedroom suite</b>	<b>J</b>	<b>350.00</b>
Household goods and furnishings, including audio, video, and computer equipment.		<b>Other misc. household furnishings and knick knacks.</b>	<b>J</b>	<b>2,050.00</b>
Household goods and furnishings, including audio, video, and computer equipment.		<b>Piano located in the living room</b>	<b>J</b>	<b>300.00</b>
Household goods and furnishings, including audio, video, and computer equipment.		<b>Spare bedroom suite</b>	<b>J</b>	<b>100.00</b>
Household goods and furnishings, including audio, video, and computer equipment.		<b>Study room furniture</b>	<b>J</b>	<b>100.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.		<b>Clothing</b>	<b>J</b>	<b>500.00</b>
7. Furs and jewelry.		<b>Jewelry</b>	<b>J</b>	<b>1,000.00</b>
8. Firearms and sports, photographic, and other hobby equipment.		<b>Sears Treadmill (16 years old); Assorted balls, bats and mitts; Ping pong and foosball table; Assorted weights</b>	<b>J</b>	<b>400.00</b>
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>Protective Life Insurance Company Term Policy #ZL6936447-3. Face value \$1,000,000. For Bruce Marks. Cash Surrender Value \$0</b>	<b>J</b>	<b>0.00</b>
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>State Farm Insurance Term policy #LF-0822-7832. Face value \$100,000. For Robin Marks. Cash Surrender Value \$0</b>	<b>J</b>	<b>0.00</b>
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>United of Omaha insurance Term policy #BU1042020. Face value \$300,000. For Bruce Marks. Cash Surrender Value \$0</b>	<b>J</b>	<b>0.00</b>
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>United of Omaha insurance Term policy #BU1051722. Face amount \$700,000. For Bruce Marks. Cash Surrender Value \$0.</b>	<b>J</b>	<b>0.00</b>
10. Annuities. Itemize and name each issuer.	<b>X</b>			

In re Bruce R. Marks Robin B. Marks

Case No. \_\_\_\_\_

Debtors

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.		Final rent check from tenants residing at the Ohio property, which is currently listed for sale.	J	3,100.00
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1999 Toyota Camry; 180,000 miles; Fair condition. No debt.	J	1,436.00

In re Bruce R. Marks Robin B. Marks  
DebtorsCase No. \_\_\_\_\_  
(If known)**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2005 Lexus ES 330; 62,000 miles; wife's leased vehicle; Good condition. Client wishes to retain/affirm vehicle. \$1.00 buyout at the end of lease.	J	16,951.00
Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Toyota Camry. 24,857 miles; Good condition. Lease purchase for \$10,600 and client wishes to retain/affirm vehicle. \$1.00 buy out at the end of lease.	J	11,222.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
<u>3</u> continuation sheets attached         Total >				<b>\$ 48,148.98</b>

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)



In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)☒ 11 U.S.C. § 522(b)(2)☐ 11 U.S.C. § 522(b)(3)☐ Check if debtor claims a homestead exemption that exceeds  
\$136,875

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
(5) Televisions	11 USC § 522(d)(3)	200.00	200.00
133 Doubletree Drive Venetia, PA 15367 (Residence-Debtors wishes to reaffirm)	11 USC § 522(d)(1)	30,303.46	402,172.00
1999 Toyota Camry; 180,000 miles; Fair condition. No debt.	11 USC § 522(d)(2)	1,436.00	1,436.00
2005 Lexus ES 330; 62,000 miles; wife's leased vehicle; Good condition. Client wishes to retain/affirm vehicle. \$1.00 buyout at the end of lease.	11 USC § 522(d)(2)	0.00	16,951.00
2006 Toyota Camry. 24,857 miles; Good condition. Lease purchase for \$10,600 and client wishes to retain/affirm vehicle. \$1.00 buy out at the end of lease.	11 USC § 522(d)(2)	0.00	11,222.00
6665 Ayleshire Drive Solon, OH 44139 (Debtors wish to surrender property)	11 USC § 522(d)(1)	0.00	389,900.00
Basement furniture	11 USC § 522(d)(3)	100.00	100.00
Bedroom suite for sons	11 USC § 522(d)(3)	200.00	200.00
Cash	11 USC § 522(d)(5)	200.00	200.00
Citizens Bank Account Savings #0209.	11 USC § 522(d)(5)	1,000.17	1,000.17
Citizens Bank Checking Account #XXXX9824.	11 USC § 522(d)(5)	7,508.19	7,508.19
Clothing	11 USC § 522(d)(5)	500.00	500.00
Dining Room Furniture	11 USC § 522(d)(3)	350.00	350.00
Family room furniture	11 USC § 522(d)(3)	450.00	450.00
Final rent check from tenants residing at the Ohio property, which is currently listed for sale.	11 USC § 522(d)(5)	3,100.00	3,100.00

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Jewelry	11 USC § 522(d)(4)	1,000.00	1,000.00
Kitchen furniture	11 USC § 522(d)(3)	100.00	100.00
Living room furniture	11 USC § 522(d)(3)	100.00	100.00
Master bedroom suite	11 USC § 522(d)(3)	350.00	350.00
National City (now PNC) Checking Account #XXXX7004	11 USC § 522(d)(5)	179.18	179.18
National City (now PNC) Savings Account #XXXX6703; Joint with Husband and Son, Bradley;	11 USC § 522(d)(5)	100.54	100.54
National City (now PNC) Savings Account #XXXX7179	11 USC § 522(d)(5)	50.44	50.44
Other misc. household furnishings and knick knacks.	11 USC § 522(d)(3)	2,050.00	2,050.00
Piano located in the living room	11 USC § 522(d)(3)	300.00	300.00
Sears Treadmill (16 years old); Assorted balls, bats and mitts; Ping pong and foosball table; Assorted weights	11 USC § 522(d)(5)	400.00	400.00
Spare bedroom suite	11 USC § 522(d)(3)	100.00	100.00
Study room furniture	11 USC § 522(d)(3)	100.00	100.00
Third Federal Savings Bank Checking Account #XXXX5100	11 USC § 522(d)(5)	101.46	101.46

In re Bruce R. Marks Robin B. Marks  
Debtors

Case No. \_\_\_\_\_  
(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 00010013537 Bass-Fineberg Leasing, Inc. P.O. Box 46938 Bedford, OH 44146		J	04/01/2007 Automobile Lease 2005 Lexus ES 330; 62,000 miles; wife's leased vehicle; Good condition. Client wishes to retain/affirm vehicle. \$1.00 buyout at the end of lease. VALUE \$16,951.00				18,483.35	1,532.35
ACCOUNT NO. 00010013768 Bass-Fineberg Leasing, Inc. P.O. Box 46938 Bedford, OH 44146		J	02/01/2010 Automobile Lease 2006 Toyota Camry. 24,857 miles; Good condition. Lease purchase for \$10,600 and client wishes to retain/affirm vehicle. \$1.00 buy out at the end of lease. VALUE \$11,222.00				15,950.00	4,728.00
ACCOUNT NO. 0017941311 Chase Home Finance P.O. Box 78420 Phoenix, AZ 85062-8420		J	04/28/2005 Second Lien on Residence 6665 Ayleshire Drive Solon, OH 44139 (Debtors wish to surrender property) VALUE \$389,900.00				82,179.51	0.00

1 continuation sheets attached

Subtotal >  
(Total of this page)

Total >  
(Use only on last page)

\$ 116,612.86	\$ 6,260.35
\$	\$

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Case No. \_\_\_\_\_

Debtors (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0005513331		J	06/01/2007 Mortgage 133 Doubletree Drive Venetia, PA 15367 (Residence-Debtors wishes to reaffirm)				371,868.54	0.00
PNC Mortgage P.O. Box 533510 Atlanta, GA 30353			VALUE \$402,172.00					
ACCOUNT NO. 720519228		J	12/01/2001 Mortgage 6665 Ayleshire Drive Solon, OH 44139 (Debtors wish to surrender property)				327,528.27	0.00
Third Federal Savings & Loan 7007 Broadway Avenue Cleveland, Ohio 44105			VALUE \$389,900.00					

Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Secured Claims

Subtotal > (Total of this page)

Total > (Use only on last page)

\$ 699,396.81	\$ 0.00
\$ 816,009.67	\$ 6,260.35

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**2 continuation sheets attached**

In re Bruce R. Marks Robin B. Marks,  
Debtors

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

### Type of Priority: Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See <i>instructions above</i> .)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>xxxx9989</b> <b>Citibank (South Dakota), N.A.</b> <b>P.O. Box 6074</b> <b>Sioux Falls, SD 57117-6074</b>	X	J	<b>09/01/2009</b> <b>Educational loan for</b> <b>David Marks. Robin</b> <b>Marks is co-signer.</b>				<b>52,622.00</b>	<b>0.00</b>	<b>52,622.00</b>
ACCOUNT NO. <b>D00649748</b> <b>Duquesne University</b> <b>P.O. Box 640094</b> <b>Pittsburgh, PA 15264-0094</b>		H	<b>07/21/2009</b> <b>Debtor/Husband's</b> <b>Student loan.</b>				<b>4,308.00</b>	<b>0.00</b>	<b>4,308.00</b>
ACCOUNT NO. <b>xxx2616</b> <b>Key Education</b> <b>c/o Great Lakes Educational</b> <b>Loan Services, Inc.</b> <b>2401 International Lane</b> <b>Madison, WI 53704-3192</b>	X	J	<b>08/01/2005</b> <b>Student loan for</b> <b>Jonathan Marks -</b> <b>Debtor/Wife</b> <b>Co-signed on loan.</b>				<b>66,991.00</b>	<b>0.00</b>	<b>66,991.00</b>
ACCOUNT NO. <b>xx2616</b> <b>KeyBank National Association</b> <b>c/o Great Lakes Educational</b> <b>Loan Services, Inc.</b> <b>2401 International Lane</b> <b>Madison, WI 53704-3192</b>	X		<b>01/03/2006</b> <b>Student loan for</b> <b>Jonathan R. Marks.</b> <b>Debtor/Wife co-signed</b> <b>for loan.</b>				<b>13,000.00</b>	<b>0.00</b>	<b>13,000.00</b>
ACCOUNT NO. <b>9125070619-1</b> <b>Sallie Mae</b> <b>P.O. Box 9500</b> <b>Wilkes Barre, PA 18773-9500</b>	X	J	<b>04/19/2005</b> <b>Student loan for</b> <b>Jonathan Marks.</b> <b>Debtor/Robin Marks is</b> <b>co-signer on loan.</b>				<b>7,385.80</b>	<b>0.00</b>	<b>7,385.80</b>

Sheet no. 1 of 2 continuation sheets attached to Schedule of  
Creditors Holding Priority Claims

Subtotals>  
(Totals of this page)

\$ <b>144,306.80</b>	\$ <b>0.00</b>	\$ <b>144,306.80</b>
\$		
	\$	\$

Total >  
(Use only on last page of the completed  
Schedule E. Report also on the Summary of  
Schedules.)

Total >  
(Use only on last page of the completed  
Schedule E. If applicable, report also on the  
Statistical Summary of Certain Liabilities  
and Related Data.)

In re Bruce R. Marks Robin B. Marks,  
Debtors

Case No. \_\_\_\_\_  
(if known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

Type of Priority: Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See <i>instructions above</i> .)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>xxxx0105</b> <b>Sallie Mae</b> <b>SLMA Servicing Center</b> <b>P.O. Box 9500</b> <b>Wilkes-Barre, PA 18773-9500</b> <b>U.S. Department of Education</b> <b>Direct Loan Servicing Center</b> <b>P.O. Box 5609</b> <b>Greenville, TX 75403-5609</b>		H	<b>08/01/2003</b> <b>Debtor/Husband's</b> <b>student loans for sons.</b>				<b>67,983.98</b>	<b>0.00</b>	<b>67,983.98</b>
ACCOUNT NO. <b>XXXX0105</b> <b>USD Ed.</b> <b>P.O. Box 530260</b> <b>Atlanta, GA 30353-0260</b>		H	<b>11/01/2003</b> <b>Debtor/Husband's</b> <b>student loans for sons.</b>				<b>111,433.56</b>	<b>0.00</b>	<b>111,433.56</b>

Subtotals>  
(Totals of this page)

\$ <b>179,417.54</b>	\$ <b>0.00</b>	\$ <b>179,417.54</b>
\$ <b>323,724.34</b>		
	\$ <b>0.00</b>	\$ <b>323,724.34</b>

Total >  
(Use only on last page of the completed  
Schedule E. Report also on the Summary of  
Schedules.)

Total >  
(Use only on last page of the completed  
Schedule E. If applicable, report also on the  
Statistical Summary of Certain Liabilities  
and Related Data. )

In re **Bruce R. Marks Robin B. Marks**

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>3728-280307-86002</b>  <b>AMERICAN EXPRESS</b> P.O. Box 1270 Newark, NJ 07101-1270  <b>NCO Financial Systems, Inc.</b> 507 Prudential Road Horsham, PA 19044  <b>United Recovery Systems, LP</b> P.O. Box 722929 Houston, TX 77272-2929 Attn: Christian Santos	J	<b>08/23/2004</b>  Credit (Gold card) card used for bill paying purposes				<b>35,172.36</b>
ACCOUNT NO. <b>3715-067885-31009</b>  <b>AMERICAN EXPRESS</b> P.O. Box 1270 Newark, NJ 07101-1270  <b>Aegis Receivables Management, Inc.</b> P.O. Box 165809 Irving, TX 75016-5809  <b>United Recovery Systems, LP</b> P.O. Box 722929 Houston, TX 77272-2929 Attn: Marcus Brown	J	<b>01/01/2003</b>  Credit card (Blue card) used for bill paying purposes				<b>50,164.04</b>
ACCOUNT NO. <b>5490-3571-5383-0476</b>  <b>BANK OF AMERICA</b> P.O. Box 15019 Wilmington, DE 19886-5019	J	<b>12/13/2007</b>  Credit card used for bill paying purposes				<b>9,563.44</b>

8 Continuation sheets attached

Subtotal > \$ **94,899.84**

Total &gt;

\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)



In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>4888-9361-0771-5025</b>  <b>BANK OF AMERICA</b> <b>P.O. Box 15019</b> <b>Wilmington, DE 19886-5019</b>	<b>J</b>	<b>01/01/2003</b>  <b>Credit card used for bill paying purposes</b>				<b>21,838.67</b>
ACCOUNT NO. <b>4791-2422-8797-5711</b>  <b>CAPITAL ONE BANK (USA) N.A.</b> <b>P.O. Box 71083</b> <b>Charlotte, NC 28272-1083</b>	<b>J</b>	<b>08/10/2007</b>  <b>Credit card used for bill paying purposes.</b>				<b>850.34</b>
ACCOUNT NO. <b>5178-0521-5113-6112</b>  <b>CAPITAL ONE BANK (USA), N.A.</b> <b>P.O. Box 71083</b> <b>Charlotte, NC 28272-1083</b>	<b>J</b>	<b>01/01/2008</b>  <b>Credit card used for bill paying purposes.</b>				<b>5,127.06</b>
ACCOUNT NO. <b>5178-0518-0578-6892</b>  <b>CAPITAL ONE BANK (USA), N.A.</b> <b>P.O. Box 71083</b> <b>Charlotte, NC 28272-1083</b>	<b>J</b>	<b>01/01/2008</b>  <b>Credit card used for bill paying purposes.</b>				<b>8,613.40</b>

Sheet no. 1 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **36,429.47**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>5491-0405-2059-4871</b>  <b>CHASE</b> <b>P.O. Box 15153</b> <b>Wilmington, DE 19886-5153</b>  <b>Weltman, Weinberg &amp; Reis Co., L.P.A</b> <b>525 Vine Street</b> <b>Suite 800</b> <b>Cincinnati, OH 45202-3122</b>	<b>J</b>	<b>12/14/2006</b>  <b>Credit card used for bill paying purposes</b>				<b>16,163.26</b>
ACCOUNT NO. <b>5184-4500-0122-1591</b>  <b>CHASE</b> <b>P.O. Box 15153</b> <b>Wilmington, DE 19886-5153</b>  <b>Frederick J. Hanna &amp; Associates, PC</b> <b>1427 Roswell Road</b> <b>Marietta, GA 30062</b>	<b>J</b>	<b>11/14/2006</b>  <b>Credit card used for bill paying purposes.</b>				<b>15,262.33</b>
ACCOUNT NO. <b>6019155</b>  <b>CLEVELAND CLINIC</b> <b>P.O. Box 94909</b> <b>Cleveland, OH 44195</b>	<b>J</b>	<b>12/01/2006</b>  <b>Medical expenses for Debtor/Bruce Marks.</b>				<b>1,007.00</b>
ACCOUNT NO. <b>25897781</b>  <b>CLEVELAND CLINIC</b> <b>P.O. Box 94909</b> <b>Cleveland, OH 44195</b>  <b>THE REVENUE GROUP</b> <b>3700 Park East Drive</b> <b>Beachwood, OH 44122</b>	<b>J</b>	<b>04/22/2005</b>  <b>Medical expense for Debtor/Robin B. Marks.</b>				<b>2,923.00</b>

Sheet no. 2 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **35,355.59**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>612192723</b>	<b>J</b>	<b>11/28/2008</b>				<b>994.52</b>
<b>CREDIT FIRST N.A.</b> <b>P.O. Box 81344</b> <b>Cleveland, OH 44188-0344</b>		<b>Credit card used for Firestone</b> <b>Complete Auto Care purchases.</b>				
<b>BK-16/ Credit Operations</b> <b>P.O. Box 81410</b> <b>Cleveland, OH 44181-0410</b>						
ACCOUNT NO. <b>5306-3000-0054-2401</b>	<b>J</b>	<b>06/02/2006</b>				<b>6,776.80</b>
<b>DINERS CLUB</b> <b>P.O. Box 6003</b> <b>The Lakes, NV 88901-6003</b>		<b>Credit card used for Diners Club food</b> <b>purchases.</b>				
<b>Alliance One Receivables Management</b> <b>4850 Street Road</b> <b>Suite 300</b> <b>Trevose, PA 19053</b>						
ACCOUNT NO. <b>R. Marks</b>	<b>J</b>	<b>08/15/2007</b>				<b>1,225.00</b>
<b>DIPAOLA QUALITY CLIMATE</b> <b>144 Chess Street</b> <b>New Eagle, PA 15067</b>		<b>Debt acquired for home improvement,</b> <b>supplies.</b>				

Sheet no. 3 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal >	\$ <b>8,996.32</b>
Total >	\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>6011-0055-7950-0060</b>  <b>DISCOVER CARD</b> <b>P.O. Box 71084</b> <b>Charlotte, NC 28272-1084</b>  <b>Capital Management Services, LP</b> <b>726 Exchange Street</b> <b>Suite 700</b> <b>Buffalo, NY 14210</b>	<b>J</b>	<b>10/23/2006</b>  Credit card used for bill paying purposes.				<b>3,653.33</b>
ACCOUNT NO. <b>240-829-40-0049106267 or XX</b>  <b>EMERGENCY PROFESSIONAL SERVICES</b> <b>7123 Pearl Road</b> <b>Cleveland, OH 44130-4975</b>  <b>NCO-Medclear</b> <b>P.O. Box 8547</b> <b>Philadelphia, PA 19101</b>	<b>J</b>	<b>11/23/2004</b>  Debt acquired for emergency services.				<b>432.00</b>
ACCOUNT NO. <b>4264-5200-1961-3314</b>  <b>FIA CARD SERVICES</b> <b>P.O. Box 15026</b> <b>Wilmington, DE 19850-5026</b>	<b>J</b>	<b>09/04/2007</b>  Credit card used for bill paying purposes from Visa Signature				<b>31,089.82</b>
ACCOUNT NO. <b>5490-9994-3806-3520</b>  <b>FIA CARD SERVICES</b> <b>P.O. Box 15026</b> <b>Wilmington, DE 19850-5026</b>	<b>J</b>	<b>08/01/2006</b>  Credit card used for bill paying purposes from Amtrust Bank.				<b>22,928.36</b>

Sheet no. 4 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **58,103.51**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>6035-3202-7371-0457</b>  <b>HOME DEPOT CREDIT SERVICES</b> <b>Processing Center</b> <b>Des Moines, IA 50364-0500</b>	<b>J</b>	<b>08/01/2007</b>  Credit card used for purchases at The Home Depot for supplies.				<b>3,521.05</b>
ACCOUNT NO. <b>91630240</b>  <b>HONDA FINANCIAL SERVICES</b> <b>National Service Center</b> <b>P.O. Box 165378</b> <b>Irving, TX 75016-5378</b>	<b>J</b>	<b>01/23/2010</b>  Lease end charges for 2007 Honda Accord SE which was returned in January 2010.				<b>1,303.67</b>
ACCOUNT NO. <b>N/A</b>  <b>JP RECOVERY</b> <b>P.O. Box 16749</b> <b>Rocky River, OH 44116</b>	<b>J</b>	<b>12/20/1999</b>  Outstanding Cleveland Clinic debt.				<b>100.00</b>
ACCOUNT NO. <b>4695-9650-0019-0922</b>  <b>JUNIPER VISA/BARCLAYCARD</b> <b>P.O. Box 13337</b> <b>Philadelphia, PA 19101-3337</b>	<b>J</b>	<b>01/06/2007</b>  Credit card used for purchases/gifts.				<b>5,335.08</b>
ACCOUNT NO. <b>5416-5570-0159-0377</b>  <b>KEYBANK MASTERCARD</b> <b>P.O. Box 183051</b> <b>Columbus, OH 43218-3051</b>	<b>J</b>	<b>09/08/2006</b>  Credit card used for bill paying purposes.				<b>25,166.02</b>

Sheet no. 5 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **35,425.82**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>031404827-8355</b>	<b>J</b>	<b>02/14/2008</b> Debt for outpatient medical services.				<b>383.00</b>
<b>MAGEE WOMENS HOSPITAL OF UPMC</b> <b>P.O. Box 382059</b> <b>Pittsburgh, PA 15250-8059</b>  <b>NCO</b> <b>2665 Elizabeth Lake Road</b> <b>Waterford, MI 48328-3277</b>						
ACCOUNT NO. <b>031404827-8355</b>	<b>J</b>	<b>02/14/2008</b> Debt for outpatient medical services.				<b>1,258.84</b>
<b>MAGEE-WOMENS HOSPITAL OF UPMC</b> <b>P.O. Box 382059</b> <b>Pittsburgh, PA 15250-8059</b>  <b>NCO</b> <b>2665 Elizabeth Lake Road</b> <b>Waterford, MI 48328-3277</b>						
ACCOUNT NO. <b>4311-9660-6800-0528</b>	<b>J</b>	<b>08/01/2006</b> Credit card used for purchases/gifts.				<b>4,799.75</b>
<b>NATIONAL CITY</b> <b>P.O. Box 856177</b> <b>Louisville, KY 40285-6177</b>						
ACCOUNT NO. <b>N/A</b>	<b>J</b>	<b>02/15/2008</b> Security deposit for property situate at: 6665 Ayleshire Drive, Solon, OH 44139.				<b>5,250.00</b>
<b>Rodney and Rosa Suggs</b> <b>6665 Ayleshire Drive</b> <b>Solon, OH 44139</b>						

Sheet no. 6 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **11,691.59**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>5121-0701-1613-7254</b>  <b>SEARS CREDIT CARDS</b> P.O. Box 183082 Columbus, OH 43218-3082  <b>Academy Collection Service, Inc.</b> 10965 Decatur Road Philadelphia, PA 19154-3210	<b>J</b>	<b>07/15/2008</b>  Credit card used for purchases/gifts.				<b>9,665.90</b>
ACCOUNT NO. <b>2510651</b>  <b>ST. CLAIR HOSPITAL</b> 1000 Bower Hill Road Pittsburgh, PA 15243-1873	<b>J</b>	<b>01/14/2009</b>  Debt for medical services. NEED ADDRESS FOR COLLECTION COMPANY.				<b>653.98</b>
ACCOUNT NO. <b>N/A</b>  <b>ST. VINCENT CHARITY HOSPITAL</b> 2351 East 22nd Street Cleveland, OH 44115	<b>J</b>	<b>11/23/2004</b>  Medical expenses for Bradley Marks.				<b>452.00</b>
ACCOUNT NO. <b>7339533</b>  <b>SUNRISE CREDIT SERVICES</b> 260 Airport Plaza P.O. Box 9100 Farmingdale, NY 11735-9100	<b>J</b>	<b>Outstanding credit card debt originating with Bank of America Account #: XXXX0121, now in collections.</b>				<b>32,312.32</b>

Sheet no. 7 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **43,084.20**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>N/A</b>	<b>J</b>	<b>09/22/1997</b>				<b>487.00</b>
<b>UNIVERSITY SUBURBAN HOSPITAL</b> <b>1611 South Green Road</b> <b>South Euclid, OH 44121</b>		<b>Medical expenses for Debtor/Bruce Marks.</b>				
ACCOUNT NO. <b>4428-2788-0900-1793</b>	<b>J</b>	<b>12/12/2007</b>				<b>12,355.46</b>
<b>US BANK</b> <b>P.O. Box 790408</b> <b>St. Louis, MO 63179-0408</b>		<b>Visa Gold card used for purchases/gifts.</b>				
<b>Messerli and Kramer P.A.</b> <b>Attorneys at Law</b> <b>3033 Campus Drive</b> <b>Suite 250</b> <b>Plymouth, MN 55441-2662</b>						
ACCOUNT NO. <b>5410-1890-1002-3418</b>	<b>J</b>	<b>09/20/2008</b>				<b>8,546.14</b>
<b>WELLS FARGO FINANCIAL CARDS</b> <b>P.O. Box 98791</b> <b>Las Vegas, NV 89193-8791</b>		<b>Mastercard used for purchases/gifts.</b>				

Sheet no. 8 of 8 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **21,388.60**Total > \$ **345,374.94**

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)



In re: Bruce R. Marks Robin B. Marks  
DebtorsCase No. \_\_\_\_\_  
(If known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY, STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
BASS FINEBERG P.O. BOX 46938 BEDFORD, OH 44146	Automobile lease regarding 2006 Toyota Camry which commenced February 1, 2010 to February 1, 2015 (60-month lease)
BASS-FINEBERG LEASING, INC. P.O. Box 46938 Bedford, OH 44146	Automobile lease regarding 2005 Lexus ES 330 which commenced April 1, 2007 to April 1, 2012 (60-month lease)
Rodney and Rosa Suggs 6665 Ayleshire Drive Solon, OH 44139	Lease for tenants residing in Debtor's Solon, Ohio property (the term was from February 15, 2008 thru February 14, 2010. Property is currently listed for sale. Debtors are surrendering property.

In re: **Bruce R. Marks    Robin B. Marks**  
Debtors

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE H - CODEBTORS

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>Robin Marks</b> <b>133 Doubletree Dr.</b> <b>Venetia, PA 15367</b>	<b>Citibank (South Dakota), N.A.</b> <b>P.O. Box 6074</b> <b>Sioux Falls, SD 57117-6074</b>
<b>Robin Marks</b> <b>133 Doubletree Dr</b> <b>Venetia, PA 15367</b>	<b>Key Education</b> <b>c/o Great Lakes Educational</b> <b>Loan Services, Inc.</b> <b>2401 International Lane</b> <b>Madison, WI 53704-3192</b>
<b>Robin Marks</b> <b>133 Doubletree Drive</b> <b>Venetia, PA 15367</b>	<b>KeyBank National Association</b> <b>c/o Great Lakes Educational</b> <b>Loan Services, Inc.</b> <b>2401 International Lane</b> <b>Madison, WI 53704-3192</b>
<b>Robin Marks</b> <b>133 Doubletree Dr</b> <b>Venetia, PA 15367</b>	<b>Sallie Mae</b> <b>P.O. Box 9500</b> <b>Wilkes Barre, PA 18773-9500</b>

In re Bruce R. Marks Robin B. Marks

Case No. \_\_\_\_\_

Debtors

(If known)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
	<b>Son</b>	<b>20</b>
	<b>Son</b>	<b>15</b>
<b>Employment:</b>	DEBTOR	SPOUSE
Occupation	<b>Director- Global Strategic Partnerships</b>	<b>Housewife</b>
Name of Employer	<b>Development Dimensions International Inc</b>	
How long employed	<b>4/2006-Present</b>	
Address of Employer	<b>1225 Washington Pike Bridgeville, PA 15017</b>	

INCOME: (Estimate of average or projected monthly income at time case filed)

DEBTOR

SPOUSE

1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly.)	\$ <u>10,833.33</u>	\$ <u>0.00</u>
2. Estimate monthly overtime	\$ <u>0.00</u>	\$ <u>0.00</u>
3. SUBTOTAL	\$ <u>10,833.33</u>	\$ <u>0.00</u>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ <u>2,416.40</u>	\$ <u>0.00</u>
b. Insurance	\$ <u>0.00</u>	\$ <u>0.00</u>
c. Union dues	\$ <u>0.00</u>	\$ <u>0.00</u>
d. Other (Specify) <u>Dental Insurance</u>	\$ <u>41.17</u>	\$ <u>0.00</u>
<u>Ee Health Savings Acct.</u>	\$ <u>370.83</u>	\$ <u>0.00</u>
<u>Gtl (Health Savings)</u>	\$ <u>23.01</u>	\$ <u>0.00</u>
<u>Local Service Tax</u>	\$ <u>4.33</u>	\$ <u>0.00</u>
<u>Medical</u>	\$ <u>264.34</u>	\$ <u>0.00</u>
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>3,120.08</u>	\$ <u>0.00</u>
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>7,713.26</u>	\$ <u>0.00</u>
7. Regular income from operation of business or profession or farm (Attach detailed statement)	\$ <u>0.00</u>	\$ <u>0.00</u>
8. Income from real property	\$ <u>0.00</u>	\$ <u>0.00</u>
9. Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>0.00</u>
11. Social security or other government assistance (Specify) _____	\$ <u>0.00</u>	\$ <u>0.00</u>
12. Pension or retirement income	\$ <u>0.00</u>	\$ <u>0.00</u>
13. Other monthly income (Specify) <u>Average Monthly Bonus</u>	\$ <u>360.00</u>	\$ <u>0.00</u>

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

14. SUBTOTAL OF LINES 7 THROUGH 13

\$	<u>360.00</u>	\$	<u>0.00</u>
----	---------------	----	-------------

15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

\$	<u>8,073.26</u>	\$	<u>0.00</u>
----	-----------------	----	-------------

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

<u>\$ 8,073.26</u>			
--------------------	--	--	--

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document.:

NONE

\_\_\_\_\_

In re Bruce R. Marks Robin B. Marks

Debtors

Case No. \_\_\_\_\_  
(If known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>3,619.22</u>
a. Are real estate taxes included?      Yes <u>✓</u> No _____		
b. Is property insurance included?      Yes <u>✓</u> No _____		
2. Utilities: a. Electricity and heating fuel	\$	<u>343.00</u>
b. Water and sewer	\$	<u>122.00</u>
c. Telephone	\$	<u>230.00</u>
d. Other <u>Jordan Tax Service- Waste Removal</u>	\$	<u>16.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>150.00</u>
4. Food	\$	<u>1,200.00</u>
5. Clothing	\$	<u>100.00</u>
6. Laundry and dry cleaning	\$	<u>25.00</u>
7. Medical and dental expenses	\$	<u>500.00</u>
8. Transportation (not including car payments)	\$	<u>100.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>0.00</u>
10. Charitable contributions	\$	<u>0.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>70.00</u>
b. Life	\$	<u>355.00</u>
c. Health	\$	<u>99.00</u>
d. Auto	\$	<u>292.00</u>
e. Other _____	\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) _____	\$	<u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>499.55</u>
b. Other _____	\$	<u>0.00</u>
14. Alimony, maintenance, and support paid to others	\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
17. Other <u>2006 Toyota Camry lease payment</u>	\$	<u>275.00</u>
<u>American Home Warranty</u>	\$	<u>44.00</u>
<u>AT&amp;T Mobile (need for work)</u>	\$	<u>372.00</u>
<u>College Books</u>	\$	<u>50.00</u>
<u>College expenses for son</u>	\$	<u>200.00</u>
<u>Guardian Protection- Alarm</u>	\$	<u>32.00</u>
<u>VFD, Sams, etc.</u>	\$	<u>25.00</u>

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 8,718.77

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

## 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	<u>8,073.26</u>
b. Average monthly expenses from Line 18 above	\$	<u>8,718.77</u>
c. Monthly net income (a. minus b.)	\$	<u>-645.51</u>

**UNITED STATES BANKRUPTCY COURT**  
**Western District of Pennsylvania**

In re: **Bruce R. Marks**

**Robin B. Marks**

Case No. \_\_\_\_\_

Chapter **7**

**BUSINESS INCOME AND EXPENSES**

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

**PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:**

1. Gross Income For 12 Months Prior to Filing: \$ 0.00

**PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:**

2. Gross Monthly Income: \$ 0.00

**PART C - ESTIMATED FUTURE MONTHLY EXPENSES:**

3. Net Employee Payroll (Other Than Debtor)	\$ <u>0.00</u>
4. Payroll Taxes	<u>0.00</u>
5. Unemployment Taxes	<u>0.00</u>
6. Worker's Compensation	<u>0.00</u>
7. Other Taxes	<u>0.00</u>
8. Inventory Purchases (Including raw materials)	<u>0.00</u>
9. Purchase of Feed/Fertilizer/Seed/Spray	<u>0.00</u>
10. Rent (Other than debtor's principal residence)	<u>0.00</u>
11. Utilities	<u>0.00</u>
12. Office Expenses and Supplies	<u>0.00</u>
13. Repairs and Maintenance	<u>0.00</u>
14. Vehicle Expenses	<u>0.00</u>
15. Travel and Entertainment	<u>0.00</u>
16. Equipment Rental and Leases	<u>0.00</u>
17. Legal/Accounting/Other Professional Fees	<u>0.00</u>
18. Insurance	<u>0.00</u>
19. Employee Benefits (e.g., pension, medical, etc.)	<u>0.00</u>
20. Payments to Be Made Directly By Debtor to Secured Creditors For	

Pre-Petition Business Debts (Specify):

**None**

21. Other (Specify):

**None**

22. Total Monthly Expenses (Add items 3 - 21) \$ 0.00

**PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:**

23. AVERAGE NET MONTHLY INCOME (Subtract Item 22 from Item 2) \$ 0.00

**United States Bankruptcy Court**  
**Western District of Pennsylvania**

In re **Bruce R. Marks Robin B. Marks**,  
 Debtors

Case No. \_\_\_\_\_

Chapter 7

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 792,072.00		
B - Personal Property	YES	4	\$ 48,148.98		
C - Property Claimed as Exempt	YES	2			
D - Creditors Holding Secured Claims	YES	2		\$ 816,009.67	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 323,724.34	
F - Creditors Holding Unsecured Nonpriority Claims	YES	9		\$ 345,374.94	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 8,073.26
J - Current Expenditures of Individual Debtor(s)	YES	2			\$ 8,718.77
TOTAL		27	\$ 840,220.98	\$ 1,485,108.95	

**United States Bankruptcy Court  
Western District of Pennsylvania**

In re **Bruce R. Marks Robin B. Marks**  
Debtors

Case No. \_\_\_\_\_  
Chapter **7**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 323,724.34
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E.	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 323,724.34

**State the following:**

Average Income (from Schedule I, Line 16)	\$ 8,073.26
Average Expenses (from Schedule J, Line 18)	\$ 8,718.77
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$ 10,833.33

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$6,260.35
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$323,724.34
4. Total from Schedule F		\$345,374.94
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$675,359.63



In re Bruce R. Marks Robin B. Marks  
Debtors

Case No. \_\_\_\_\_  
(If known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 29 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: 3/2/2010

Signature: /s/ Bruce R. Marks  
Bruce R. Marks  
Debtor

Date: 3/2/2010

Signature: /s/ Robin B. Marks  
Robin B. Marks  
(Joint Debtor, if any)

[If joint case, both spouses must sign]

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**  
(NOT APPLICABLE)

**UNITED STATES BANKRUPTCY COURT**  
**Western District of Pennsylvania**

In re: **Bruce R. Marks Robin B. Marks**

Case No. \_\_\_\_\_

Debtors

(If known)

## STATEMENT OF FINANCIAL AFFAIRS

### 1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
200,874.00	Development Dimensions International, Inc.	2008
13,989.00	The Marks Group	2008
12,500.00	The Marks Group	2009
175,777.65	Development Dimensions International, Inc.	2009

### 2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
--------	--------	--------------------

### 3. Payments to creditors

**Complete a. or b., as appropriate, and c.**

None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
------------------------------	-------------------	-------------	--------------------

- None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	------------------------------	-----------------------------------	--------------------

- None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
---	-----------------	-------------	--------------------

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

- None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATIO	STATUS OR DISPOSITION
<b>Chase Bank (USA), N.A. vs. Robin B. Marks 2010-274</b>	<b>Civil Division- Arbitration case regarding outstanding Chase credit card debt. File date January 12, 2010</b>	<b>Court of Common Pleas Washington County, PA</b>	<b>Pending</b>

- None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
--	-----------------	-----------------------------------

#### 5. Repossessions, foreclosures and returns

- None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
--	--	-----------------------------------

## 6. Assignments and receiverships

- None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
---------------------------------	-----------------------	---

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND ADDRESS OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	---	------------------	---

## 7. Gifts

- None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
--	--------------------------------------	-----------------	-------------------------------------

## 8. Losses

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
---	--	-----------------

## 9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>Advantage Credit Counseling Service</b> 2403 Sidney Street Suite 400 Pittsburgh, PA 15203	<b>CLASS DATE 3/1/10- Prebankruptcy Filing Counseling Course</b>	<b>\$50 each</b>
<b>Carol L. Hanna, Esquire</b> 2700 South Park Road Suite 102 Bethel Park, PA 15102	<b>July 28, 2009- \$50; August 3, 2009- \$50; August 12, 2009 \$1,250; February 26, 2010 \$1,450</b>	<b>\$2,500 attorney fee plus filing fee</b>

## 10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
---	------	---

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR INTEREST IN PROPERTY
-------------------------------	------------------------	---

## 11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	--	------------------------------------

## 12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITOR	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
--	--	-------------------------------	---

## 13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
------------------------------	-------------------	---------------------

## 14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
------------------------------	--------------------------------------	----------------------

## 15. Prior address of debtor

None ☒ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
---------	-----------	--------------------

## 16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

## 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

None



b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

None



c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
---------------------------------------	---------------	-----------------------

## 18. Nature, location and name of business

None



a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Nationwide Services Group, Inc.	34-1780629	10850 Pearl Road #40 Cleveland, OH 44136 Attn: Chris Duke	Client had 5% stock ownership. Company was in financial trouble therefore he sold his stock back to the majority owner for \$5.00. No income.	01/01/2002 12/31/2008
The Marks Group	xxx0105	133 Doubletree Drive Venetia, PA 15367	Out of business 12/31/2008. Last income of \$12,500 was received in 2009 for services performed in 2008.	04/01/2002 12/31/2008

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
------	---------

\* \* \* \* \*

*[if completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 3/2/2010

Signature of Debtor /s/ Bruce R. Marks  
Bruce R. Marks

Date 3/2/2010

Signature of Joint Debtor (if any) /s/ Robin B. Marks  
Robin B. Marks



**UNITED STATES BANKRUPTCY COURT  
Western District of Pennsylvania**

In re: Bruce R. Marks Robin B. Marks  
Debtors

Case No. \_\_\_\_\_  
Chapter 7

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

- ☐ I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
- ☐ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
- ☐ I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
1. 2005 Lexus ES 330; 62,000 miles; wife's leased vehicle; Good condition. Client wishes to retain/affirm vehicle. \$1.00 buyout at the end of lease.	Bass-Fineberg Leasing, Inc.				X
2. 2006 Toyota Camry. 24,857 miles; Good condition. Lease purchase for \$10,600 and client wishes to retain/affirm vehicle. \$1.00 buy out at the end of lease.	Bass-Fineberg Leasing, Inc.				X
3. 6665 Ayleshire Drive Solon, OH 44139 (Debtors wish to surrender property)	Chase Home Finance	X			
4. 133 Doubletree Drive Venetia, PA 15367 (Residence-Debtors wishes to reaffirm)	PNC Mortgage				X
5. 6665 Ayleshire Drive Solon, OH 44139 (Debtors wish to surrender property)	Third Federal Savings & Loan	X			

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)
1. Automobile lease regarding 2006 Toyota Camry which commenced February 1, 2010 to February 1, 2015 (60-month lease)	BASS FINEBERG	X

<b>2. Automobile lease</b> regarding 2005 Lexus ES 330 which commenced April 1, 2007 to April 1, 2012 (60-month lease)	<b>BASS-FINEBERG</b> <b>LEASING, INC.</b>	<b>X</b>
<b>3. Lease for tenants residing</b> in Debtor's Solon, Ohio property (the term was from February 15, 2008 thru February 14, 2010. Property is currently listed for sale. Debtors are surrendering property.	<b>Rodney and Rosa</b> <b>Suggs</b>	<b>X</b>

**/s/ Bruce R. Marks**                      **3/2/2010**

**Bruce R. Marks**

Signature of Debtor

Date

**/s/ Robin B. Marks**                      **3/2/2010**

**Robin B. Marks**

Signature of Joint Debtor (if any)

Date

In re **Bruce R. Marks, Robin B. Marks**

Debtor(s)

Case Number:

(If known)

According to the calculations required by this statement:

☐ The presumption arises☒ The presumption does not arise

(Check the box as directed in Parts I, III, and VI of this statement.)

**CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME  
AND MEANS-TEST CALCULATION**

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

**Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS**

1A	<p>If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> <b>Veteran's Declaration.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).</p>
1B	<p>If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.</p> <p><input type="checkbox"/> <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.</p>

**Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION**

2	<p><b>Marital/filing status.</b> Check the box that applies and complete the balance of this part of this statement as directed.</p> <p>a. <input type="checkbox"/> Unmarried. <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b></p> <p>b. <input type="checkbox"/> Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." <b>Complete only Column A ("Debtor's Income") for Lines 3-11.</b></p> <p>c. <input type="checkbox"/> Married, not filing jointly, without the declaration of separate households set out in line 2.b above. <b>Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.</b></p> <p>d. <input checked="" type="checkbox"/> Married, filing jointly. <b>Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.</b></p>												
	<p>All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.</p>		<p><b>Column A</b> <b>Debtor's</b> <b>Income</b></p>	<p><b>Column B</b> <b>Spouse's</b> <b>Income</b></p>									
3	<b>Gross wages, salary, tips, bonuses, overtime, commissions.</b>		\$10,833.33	\$0.00									
4	<p><b>Income from the operation of a business, profession or farm.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. <b>Do not include any part of the business expenses entered on Line b as a deduction in Part V.</b></p> <table border="1" style="width: 100%;"> <tr> <td style="width: 5%;">a.</td> <td>Gross Receipts</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>b.</td> <td>Ordinary and necessary business expenses</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>c.</td> <td>Business income</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>		a.	Gross Receipts	\$ 0.00	b.	Ordinary and necessary business expenses	\$ 0.00	c.	Business income	Subtract Line b from Line a	\$0.00	\$0.00
a.	Gross Receipts	\$ 0.00											
b.	Ordinary and necessary business expenses	\$ 0.00											
c.	Business income	Subtract Line b from Line a											
	<p><b>Rent and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. <b>Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.</b></p>												

5	a.	Gross Receipts	\$ 0.00	\$0.00	\$0.00			
	b.	Ordinary and necessary operating expenses	\$ 0.00					
	c.	Rent and other real property income	Subtract Line b from Line a					
6	Interest, dividends, and royalties.			\$0.00	\$0.00			
7	Pension and retirement income.			\$0.00	\$0.00			
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.			\$0.00	\$0.00			
9	<b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:			\$0.00	\$0.00			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 20%;">Debtor \$ _____</td> <td style="width: 40%;">Spouse \$ _____</td> </tr> </table>					Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ _____	Spouse \$ _____
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ _____	Spouse \$ _____						
10	<b>Income from all other sources.</b> Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			\$0.00	\$0.00			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 55%;"></td> <td style="width: 40%; text-align: right;">\$ _____</td> </tr> </table>					a.		\$ _____
	a.		\$ _____					
Total and enter on Line 10.								
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 thru 10 in Column B. Enter the total(s).			\$10,833.33	\$0.00			
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.			<b>\$ 10,833.33</b>				
<b>Part III. APPLICATION OF § 707(b)(7) EXCLUSION</b>								
13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.				<b>\$129,999.96</b>			
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				<b>\$75,867.00</b>			
	a. Enter debtor's state of residence: <b>PA</b> _____ b. Enter debtor's household size: <b>4</b> _____							
15	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.							
<input type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.								
<input checked="" type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement.								

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

**Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)**

16	Enter the amount from Line 12.	<b>\$10,833.33</b>			
17	<p><b>Marital adjustment.</b> If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;"></td> <td style="width: 40%; text-align: right;">\$</td> </tr> </table> <p>Total and enter on Line 17 .</p>	a.		\$	<b>\$ 0.00</b>
a.		\$			
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	<b>\$10,833.33</b>			

**Part V. CALCULATION OF DEDUCTIONS FROM INCOME****Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)**

19A	<p><b>National Standards: food, clothing and other items.</b> Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	<b>\$ 1,370.00</b>																								
19B	<p><b>National Standards: health care.</b> Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3">Household members under 65 years of age</th> <th colspan="3">Household members 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td style="width: 5%; text-align: center;">a1.</td> <td style="width: 35%;">Allowance per member</td> <td style="width: 20%; text-align: right;"><b>57.00</b></td> <td style="width: 5%; text-align: center;">a2.</td> <td style="width: 35%;">Allowance per member</td> <td style="width: 20%; text-align: right;"><b>144.00</b></td> </tr> <tr> <td style="text-align: center;">b1.</td> <td>Number of members</td> <td style="text-align: right;"><b>4.00</b></td> <td style="text-align: center;">b2.</td> <td>Number of members</td> <td style="text-align: right;"><b>0.00</b></td> </tr> <tr> <td style="text-align: center;">c1.</td> <td>Subtotal</td> <td style="text-align: right;"><b>228.00</b></td> <td style="text-align: center;">c2.</td> <td>Subtotal</td> <td style="text-align: right;"><b>0.00</b></td> </tr> </tbody> </table>	Household members under 65 years of age			Household members 65 years of age or older			a1.	Allowance per member	<b>57.00</b>	a2.	Allowance per member	<b>144.00</b>	b1.	Number of members	<b>4.00</b>	b2.	Number of members	<b>0.00</b>	c1.	Subtotal	<b>228.00</b>	c2.	Subtotal	<b>0.00</b>	<b>\$ 228.00</b>
Household members under 65 years of age			Household members 65 years of age or older																							
a1.	Allowance per member	<b>57.00</b>	a2.	Allowance per member	<b>144.00</b>																					
b1.	Number of members	<b>4.00</b>	b2.	Number of members	<b>0.00</b>																					
c1.	Subtotal	<b>228.00</b>	c2.	Subtotal	<b>0.00</b>																					
20A	<p><b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).</p>	<b>\$ 530.00</b>																								
20B	<p><b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;">IRS Housing and Utilities Standards; mortgage/rental expense</td> <td style="width: 40%; text-align: right;"><b>\$ 890.00</b></td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Average Monthly Payment for any debts secured by home, if any, as stated in Line 42.</td> <td style="text-align: right;"><b>\$ 3,582.00</b></td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Net mortgage/rental expense</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense	<b>\$ 890.00</b>	b.	Average Monthly Payment for any debts secured by home, if any, as stated in Line 42.	<b>\$ 3,582.00</b>	c.	Net mortgage/rental expense	Subtract Line b from Line a	<b>\$ 0.00</b>															
a.	IRS Housing and Utilities Standards; mortgage/rental expense	<b>\$ 890.00</b>																								
b.	Average Monthly Payment for any debts secured by home, if any, as stated in Line 42.	<b>\$ 3,582.00</b>																								
c.	Net mortgage/rental expense	Subtract Line b from Line a																								

21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: <b>Work phone expense (AT&amp;T \$372), high taxes, interest rate and gas bill for older home.</b>	<b>\$ 3,358.00</b>									
22A	<b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input type="checkbox"/> 0 <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	<b>\$ 235.00</b>									
22B	<b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	<b>\$ 0.00</b>									
23	<b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%; margin-top: 10px; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 75%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 20%; text-align: right;">\$ 489.00</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42.</td><td style="text-align: right;">\$ 499.55</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td style="text-align: right;">Subtract Line b from Line a</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$ 489.00	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42.	\$ 499.55	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a	<b>\$ 0.00</b>
a.	IRS Transportation Standards, Ownership Costs	\$ 489.00									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42.	\$ 499.55									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a									
24	<b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b> Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%; margin-top: 10px; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 75%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 20%; text-align: right;">\$ 489.00</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42.</td><td style="text-align: right;">\$ 275.00</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 2</td><td style="text-align: right;">Subtract Line b from Line a</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$ 489.00	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42.	\$ 275.00	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	<b>\$ 214.00</b>
a.	IRS Transportation Standards, Ownership Costs	\$ 489.00									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42.	\$ 275.00									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a									
25	<b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. <b>Do not include real estate or sales taxes.</b>	<b>\$ 2,416.40</b>									
26	<b>Other Necessary Expenses: involuntary deductions for employment.</b> Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as voluntary 401(k) contributions.</b>	<b>\$ 0.00</b>									
27	<b>Other Necessary Expenses: life insurance.</b> Enter total average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b>	<b>\$ 355.00</b>									

28	<b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. <b>Do not include payments on past due obligations included in Line 44.</b>		\$ 0.00									
29	<b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.		\$ 0.00									
30	<b>Other Necessary Expenses: childcare.</b> Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. <b>Do not include other educational payments.</b>		\$ 0.00									
31	<b>Other Necessary Expenses: health care.</b> Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. <b>Do not include payments for health insurance or health savings accounts listed in Line 34.</b>		\$ 500.00									
32	<b>Other Necessary Expenses: telecommunication services.</b> Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. <b>Do not include any amount previously deducted.</b>		\$ 0.00									
33	<b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.		\$ 9,206.40									
<b>Subpart B: Additional Living Expense Deductions</b>												
<b>Note: Do not include any expenses that you have listed in Lines 19-32</b>												
34	<b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. <table border="1" style="width: 100%;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 85%;">Health Insurance</td> <td style="width: 10%;">\$99.00</td> </tr> <tr> <td>b.</td> <td>Disability Insurance</td> <td>\$</td> </tr> <tr> <td>c.</td> <td>Health Savings Account</td> <td>\$699.35</td> </tr> </table>		a.	Health Insurance	\$99.00	b.	Disability Insurance	\$	c.	Health Savings Account	\$699.35	\$ 798.35
a.	Health Insurance	\$99.00										
b.	Disability Insurance	\$										
c.	Health Savings Account	\$699.35										
Total and enter on Line 34 <b>If you do not actually expend this total amount,</b> state your actual total average monthly expenditures in the space below: \$ _____												
35	<b>Continued contributions to the care of household or family members.</b> Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		\$ 0.00									
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.		\$ 0.00									
37	<b>Home energy costs.</b> Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. <b>You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.</b>		\$									
38	<b>Education expenses for dependent children less than 18.</b> Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. <b>You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</b>		\$ 0.00									

39	<b>Additional food and clothing expense.</b> Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) <b>You must demonstrate that the additional amount claimed is reasonable and necessary.</b>	\$
40	<b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	\$ 0.00
41	<b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40.	\$ 798.35

### Subpart C: Deductions for Debt Payment

42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.																						
	<table border="1"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt</th> <th>Average Monthly Payment</th> <th>Does payment include taxes or insurance?</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td>PNC Mortgage</td> <td>Residence- 133 Doubletree Dr., Venetia, PA 15367</td> <td>\$ 3,582.00</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td>b.</td> <td>Bass-Fineberg Leasing, Inc.</td> <td>2005 Lexus ES 330</td> <td>\$ 499.55</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> <tr> <td>c.</td> <td>Bass-Fineberg Leasing, Inc.</td> <td>2006 Toyota Camry</td> <td>\$ 275.00</td> <td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td> </tr> </tbody> </table>		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	a.	PNC Mortgage	Residence- 133 Doubletree Dr., Venetia, PA 15367	\$ 3,582.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	b.	Bass-Fineberg Leasing, Inc.	2005 Lexus ES 330	\$ 499.55	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	c.	Bass-Fineberg Leasing, Inc.	2006 Toyota Camry	\$ 275.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Total: Add Lines a, b and c	\$ 4,356.55
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?																			
a.	PNC Mortgage	Residence- 133 Doubletree Dr., Venetia, PA 15367	\$ 3,582.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no																			
b.	Bass-Fineberg Leasing, Inc.	2005 Lexus ES 330	\$ 499.55	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no																			
c.	Bass-Fineberg Leasing, Inc.	2006 Toyota Camry	\$ 275.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no																			
43	<b>Other payments on secured claims.</b> If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.																						
	<table border="1"> <thead> <tr> <th></th> <th>Name of Creditor</th> <th>Property Securing the Debt</th> <th>1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table>		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount	a.			\$	Total: Add Lines a, b and c	\$ 0.00												
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount																				
a.			\$																				
44	<b>Payments on prepetition priority claims.</b> Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. <b>Do not include current obligations, such as those set out in Line 28.</b>		\$ 5,395.40																				
45	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.																						
	<table border="1"> <tbody> <tr> <td>a.</td> <td>Projected average monthly Chapter 13 plan payment.</td> <td>\$</td> </tr> <tr> <td>b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</td> <td>x 7.80</td> </tr> <tr> <td>c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td>Total: Multiply Lines a and b</td> </tr> </tbody> </table>	a.	Projected average monthly Chapter 13 plan payment.	\$	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x 7.80	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$ 0.00												
a.	Projected average monthly Chapter 13 plan payment.	\$																					
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x 7.80																					
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b																					
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.		\$ 9,751.95																				



## Subpart D: Total Deductions from Income

47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.	\$19,756.70
----	---	-------------

## Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION

48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))	\$ 10,833.33
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))	\$ 19,756.70
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result	\$ -8,923.37
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.	\$ -535,402.20
52	<p><b>Initial presumption determination.</b> Check the applicable box and proceed as directed.</p> <p><input checked="" type="checkbox"/> <b>The amount on Line 51 is less than \$6,575.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> <b>The amount set forth on Line 51 is more than \$10,950.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> <b>The amount on Line 51 is at least \$6,575, but not more than \$10,950.</b> Complete the remainder of Part VI (Lines 53 through 55).</p>	
53	Enter the amount of your total non-priority unsecured debt	\$
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$ 0.00
55	<p><b>Secondary presumption determination.</b> Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.</p> <p><input type="checkbox"/> <b>The amount on Line 51 is equal to or greater than the amount on Line 54.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.</p>	

## Part VII. ADDITIONAL EXPENSE CLAIMS

56	<p><b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.</p>	
	Expense Description	Monthly Amount
	a.	\$
	Total: Add Lines a, b, and c	\$0.00

## Part VIII: VERIFICATION

57	<p>I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case, both debtors must sign.)</p> <p>Date: <u>3/2/2010</u> Signature: <u>/s/ Bruce R. Marks</u> Bruce R. Marks, (Debtor)</p> <p>Date: <u>3/2/2010</u> Signature: <u>/s/ Robin B. Marks</u> Robin B. Marks, (Joint Debtor, if any)</p>	
----	--	--

UNITED STATES BANKRUPTCY COURT  
Western District of Pennsylvania

In re: Bruce R. Marks Robin B. Marks  
Debtors

Case No. \_\_\_\_\_  
Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY  
FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>2,500.00</u>
Prior to the filing of this statement I have received	\$	<u>2,500.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a) Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b) Preparation and filing of any petition, schedules, statement of affairs, and plan which may be required;
- c) Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d) Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e) [Other provisions as needed]

**None**

6. By agreement with the debtor(s) the above disclosed fee does not include the following services:

**FILING FEE TO COURT**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: 3/2/2010

/s/Carol L. Hanna

Carol L. Hanna, Esquire, Bar No. 59914

Carol L. Hanna, Attorney at Law  
Attorney for Debtor(s)